

**DEPARTMENT OF INSURANCE**

OFFICE OF THE COMMISSIONER

300 CAPITOL MALL, 17<sup>TH</sup> FLOOR

SACRAMENTO, CA 95814

**July 23, 2001**

**TO: All Insurers Writing Credit Property Insurance or Credit Unemployment Insurance in the State of California and Other Interested Persons**

**SUBJECT: Annual Experience Report of Credit Property and Credit Unemployment Insurance Statistics Pursuant to California Insurance Code §779.36**

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California Insurance Code Section 779.36 requires that the Insurance Commissioner adopt regulations specifying prima facie rates based upon presumptive loss ratios for each class of credit disability, credit unemployment, credit property, and credit life insurance. The prima facie rates shall be based upon loss experience filed with the commissioner, aggregated by class.

Pursuant to this statute, I am asking that premium, loss, reserves, and expense data for Credit Property Insurance and Credit Unemployment Insurance be filed by all California licensed property and casualty insurers that are writing, or have written, either Credit Property or Credit Unemployment insurance in 1998, 1999, or 2000. This reporting requirement shall be continued in future reports, to be filed annually.

If your company wrote either Credit Property or Credit Unemployment insurance in any of the three years, please complete the report forms and return them to our office by **October 1, 2001**. The forms are available either on a diskette or as a downloadable form on the Department of Insurance website at "<http://www.insurance.ca.gov>." If you cannot download the forms from the website, please call our office at (213) 346-6732 for a diskette of the report forms. When you have completed filling out the forms, please save it on a diskette and send us a copy of the diskette and a print out of your report.

If your company did not write either Credit Property or Credit Unemployment insurance in all three calendar years (1998, 1999, and 2000), please fill out and return the attached CPIER and CUIER forms indicating that your company has "No Data" to report.

If you have any questions regarding the completion of the forms, please call my staff at (213) 346-6732. Thank you for your cooperation.

Very truly yours,

A handwritten signature in cursive script that reads "Harry W. Low".

Harry W. Low  
Insurance Commissioner